## Minutes of the Health and Human Services Board

## **Thursday, May 19, 2005**

**Members Present:** Dennis Farrell Chair, Richard Wutt, Vera Stroud, Duane Paulson, Dr. John

Guy, Barbara Roncke, Duane Stamsta. Absent: JoAnn Weidmann, Mike

O'Brien

Others Present: County Executive Daniel Finley, Health and Human Services Director

Peter Schuler, Health and Human Services Deputy Director Don Maurer,

Clinical Services Manager Mike DeMares

The meeting was preceded by a luncheon of the Board Members and County Executive Finley. Board Chairman Dennis Farrell called the official meeting to order at 12:00 Noon.

## Presentation to County Executive Finley of the Health and Human Services Board's 2006 Budget Recommendations

County Executive Finley began the meeting by stating that 2006 is going to be a very difficult budget year because of the start-up costs of the new jail, but that 2007 will be less problematic as the jail will no longer be a major new budget driver. There will need to be some cuts throughout county departments, fee increases, but hopefully they will make the smallest impact as possible. Finley noted that the county will be using more reserves but in a prudent way, and he intends to submit a budget which meets the intent of a tax freeze (adjusted for inflation).

Chair Farrell reported that the board members met on May 5, 2005 and reviewed the data from all advisory committees and limited the list to 5 prioritized recommendations in light of the economic and fiscal realities. Six other issues were of significant importance but not prioritized due to those realities and another six issues were endorsed because they had no request for specific funding. The first priority is the continuation of services at the 2005 level. We're presently on a holding pattern until we determine the impact of the state and federal budget. Second on the list of recommendations was the need for increased Spanish bilingual capacity in the Public Health Division. Reclassification of a present position would cost considerably less at \$8,316 than creating a new position at a cost of \$42,402. Maurer reported that as a followup to the previous discussion on this, there has been some discussion with Sue Zastrow of Human Resources; and Dr. Healy Haney is putting together figures on what was spent on the Language Line vs. the cost of reclassifying a position. Supervisor Paulson indicated his willingness to support this through the Personnel Committee to get it done now rather than waiting for 2006 budget.

The third priority is to increase services to the SED (seriously emotionally disturbed) population through wrap-around service delivery system and flexible funding for summer, after school, weekend and crisis respite programming. The estimated cost would be \$31,000, but would avoid deep-end services in the long run if we otherwise have to institutionalize anyone of this population. This is a need of the Child and Family Services Advisory Committee as well as the Mental Health Advisory Committee. This population consists of children with very severe problems, i.e. fire starters, violent, and cannot attend a normal day care facility. A few hours of

respite for the parents and providing them with services for the summer, after school, and crisis respite can make a different between being able to keep a child in the family versus being institutionalized. Director Schuler state that he has some hope that our partnership with Milwaukee for a grant might help us to at least partially address the issue of the SED children. This would allow us to get more Title 19 funding, but the government is very strict and there is a lot of accountability which takes extra staff time in order to qualify for the funding. It is not yet at the level to cover the entire cost and it provides only a federal percent. It is to be used for case management which might allow us to use less tax levy in that area.

There were two issues tied for fourth priority, the first of which is to develop a Change Reporting Center for Workforce Development calls and secondly to collaborate with the Developmental Disability Advisory Committee to protect the county's most vulnerable citizens if staff must work to trim current programs in order to allow services for new clients. The Change Reporting Center has been discussed in the past as a way to alleviate the frustrations of both clients and workers when phone calls cannot be returned. The average worker at the Workforce Development Center is getting between 40 – 50 voicemails per day and caseloads at 350+ per worker don't permit timely responses. The State originally said they were going to implement a Change Reporting Center, but they have not yet developed this. Dane County, LaCrosse County and Milwaukee County have piloted this program and say it definitely works, but the State is not putting any money into it. Maurer stated that this is a cost effective and smarter way to partially address the tremendous caseload growth, as it's fiscally impossible to hire enough workers to keep up with caseload growth. This program would involve a person to answer calls for those clients who need to report changes to their address, employment, etc. in order to continue receiving services from the Workforce Development Center. The software is already out there on a state computer system and they can tap into that. The Board and Committee saw a demo of a State website at the April 14<sup>th</sup> meeting that will allow people to access and determine whether they may be eligible for benefits. The State did not have a study to determine what percentage of our caseload would have access to a home computer, but it would be available at libraries. If a person is eligible, eventually they will be able to submit an application.

The Developmental Disabilities Advisory Committee is asking to keep current services, but felt it was important enough to list this separately from the number one priority. An example of what could happen - if a client is living in a group home and is spending days at the training center, there is no staff at the group home during these hours. If any of the services were cut at the training center, then additional staff would have to be added to the group home to care for the client who would not be able to attend the training center as often. This would then create a problem for the group home because of the cost of additional staff. This was somewhat touched on last year during discussions around funding for Fairview South graduates. Long Term Care Division Manager Jack Bodien has been involved in discussions with families and agencies to determine whether voluntary payments for some services would be possible. Some people may be willing to provide activities from family to family. This is the kind of discussion that the DDAC would like to keep going.

After reviewing the prioritized needs, Farrell went over the remainder of the issues. When bringing up the topic of "211" and the need to ensure quality and accredited services by providing for increased staffing to meet peak time demand and a 19% increase in call volume,

Finley stated that the majority of 211 calls come from the City of Waukesha, but other communities are not using the service. It's important to reach communities and citizens to promote this service. There was also discussion on the unmet needs of the underserved and changing populations requiring AODA services, particularly Spanish speaking individuals, incarcerated females, women with children needing halfway house services, the aged, prescription drug abusers, and individuals with gambling addiction. A work group may be needed to urge one of the bigger agencies to start such a program and to help determine the number of individuals who may need these services. The ¾ way house program that the County was attempting to provide last year was eventually started by a non-profit group called SALS, which has a women's and men's home. It is a possibility that if we receive the drug court grant that some of these issues may be addressed. We hope to hear by mid-summer if we are going to receive the grant and then we can work with the jail – Meg Schnabl and Mike Giese have done an excellent job of understanding these needs.

Farrell moved on to the endorsement page. These are issues which are either not in our area to fund or are not requests for funding, but as a board we can support and communicate these needs to lobbyists and legislators. With regard to the Child Protection Center, the Women's Center and Family Services are taking the lead into looking into this service, which is needed due to the current situation of child victims of sexual assault being taken to Milwaukee for forensic interviews and other medical exam services. The mission of the Center is to alleviate secondary trauma to children who have been victims of maltreatment whether through physical or sexual abuse or neglect. It would provide a multidisciplinary coordinated response by various community agencies including law enforcement, the Department of Health and Human Services, the District Attorney and the medical community. Other issues included the endorsement of the Criminal Justice Collaborating Council's Alcohol and Drug Court, a peer support group in the area of mental health, and initiating a county sales tax.

Stamsta left at 1:15 p.m.

Finley asked about the "Shirlee" program and DeMares explained that we applied for a grant and we were able to hire a half-time staff member to work in the jail. Schuler spoke of the possibility of using the 20-bed section in the jail strictly for mental health and AODA issues – placing persons in a setting to get them re-integrated into the community rather than serving long terms in jail.

Roncke left at 1:20 p.m.

## **Board Approval for Medical Assistance Plan for Comprehensive Community Services**

DeMares addressed the Board regarding the Medical Assistance Plan for Comprehensive Community Services. These services are rehabilitative services such as the residential support programs, vocational services and the SAIL program. This plan states that the agency agrees to make available the non-federal share needed to provide Medicaid comprehensive community services.

MOTION: A motion was made by Duane Paulson seconded by Dr. John Guy to approve the Medical Assistance Plan for comprehensive community services. Motion carried 5-0.

MOTION: A motion was made by Dick Wutt seconded by Dr. John Guy to adjourn the meeting. Motion carried 5-0. The meeting adjourned at 1:43 p.m.
Minutes recorded by Kathy Leach
Approved on
Date